Current Provider Information for Supports for Community Living (SCL) Waiver

Updated: September 28, 2018

Becoming an SCL Provider

 If you are interested in becoming an SCL provider, visit the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) SCL provider website for more information.

• SCL Rate Increase

- New rates took effect for SCL on July 1, 2018. The new rates are listed below.
- You can read more about the rate change here.

Traditional Service	New Rate Per Unit
Case Management	\$352.00
Community Access (Individual)	\$8.80
Community Access (Group)	\$4.40
Community Guide	\$8.80
Consultative Clinical & Therapeutic Services	\$24.75
Day Training	\$2.42
Day Training (Licensed Adult Day Health Center)	\$3.30
Person Centered Coach	\$6.33
Personal Assistance	\$6.09
Positive Behavior Supports	\$731.50
Residential Support Level I (4-8 residents)	\$143.39
Residential Support Level I (3 residents or less)	\$189.71
Residential Support Level II (12+ hours supervision)	\$155.86
Residential Support Level II (Less than 12 hours supervision)	\$86.90
Respite	\$3.05
Supported Employment	\$11.28
Technology Assisted Residential	\$86.90

- Level of Care (LOC) and Person-Centered Service Plan (PCSP) process
 - For applications submitted in MWMA:
 - All LOC assessments and PCSPs must be submitted within MWMA.
 - For applications not submitted within MWMA
 - The initial LOC assessment should be faxed to Carewise Health at (800) 807-8843. When LOC is met, submit the PCSP in MWMA. All

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subsequent LOC assessments and PCSPs must be submitted within MWMA.

 Upon approval of the PCSP, the case manager is to transition the person into MWMA and complete all subsequent LOC assessments and PCSPs within MWMA. All future applications for placement on the SCL waiting list must be submitted through MWMA.

SCL Waiver Renewal

- The Centers for Medicare and Medicaid Services (CMS) renewed the current SCL waiver application in spring of 2017. The official renewal was implemented on April 1, 2017. The SCL waiver renewal period is effective March 1, 2017 through February 28, 2022.
- As of April 1, 2017, providers should be using SCL regulations 907 KAR 12:010 and 907 KAR 12:020. The regulations became effective June 3, 2016.
- For documentation requirements after March 15, 2017, please see SCL Provider Letter #A-49. DMS will follow those documentation requirements, exceptional support protocols, and the guidance provided about billing audits and information on technical assistance included in the letter.
- As of April 1, 2017, all exceptional support requests must be submitted through the Medicaid Waiver Management Application (MWMA). No exceptional support requests will be accepted via fax to DDID.